

NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

The terms of the Notice of Privacy Practices apply to Tina Joyce D.O., LLC and all of the entities and persons associated with Tina Joyce D.O., LLC. Tina Joyce D.O., LLC will share personal health information of our patients as necessary to carry out treatment, payment, and health care operations as permitted by law.

Tina Joyce D.O., LLC is required by law to maintain the privacy of patients' personal health information and to provide patients with notice of Tina Joyce D.O., LLC legal duties and privacy practices with respect to your personal health information. Tina Joyce D.O., LLC is required to abide by the terms of this Notice so long as it remains in effect. Tina Joyce D.O., LLC reserves the right to change the terms of this Notice of Privacy Practices as necessary and make the new Notice effective for all personal health information maintained by Tina Joyce D.O., LLC.

USES AND DISCLOSURES OF YOUR PERSONAL HEALTH INFORMATION

Your Authorization. Except for the instances listed below, Tina Joyce D.O., LLC will not use or disclose your personal health information unless you have signed a form authorizing the use or disclosure. You have the right to revoke that authorization in writing unless Tina Joyce D.O., LLC has acted in reliance on the authorization.

Uses and Disclosures for Treatment. Tina Joyce D.O., LLC will make uses and disclosures of your personal health information as necessary for your treatment. For instance, doctors, nurses and other professionals involved in your care will use information in your medical record and information that you provide about your symptoms and reactions to plan a course of treatment for you that may include procedures, medications, tests, etc. Tina Joyce D.O., LLC may also release your personal health information to another health care facility or professional who is not affiliated with this organization but who is or will be providing treatment to you.

Uses and Disclosures for Payment. Tina Joyce D.O., LLC will make uses and disclosures of your personal health information as necessary for the payment purposes of those health professionals and facilities that have treated you or provided services to you. For instance, Tina Joyce D.O., LLC may forward information regarding your medical procedures and treatment to your insurance company to arrange payment for the services provided to you, or use your information to prepare a bill to send to you or the person responsible for your payment.

Family and Friends Involved in Your Care. With your approval, Tina Joyce D.O., LLC may from time to time disclose your personal health information to designated family, friends, and others who are involved in your care or in payment of your care in order to facilitate that person's involvement in caring for you or paying for your care. If you are unavailable, incapacitated, or facing an emergency medical situation and it is determined that a limited disclosure may be in your best interest, limited personal health information may be shared with such individuals without your approval. Tina Joyce D.O., LLC may also disclose limited health information to a public or private entity that is authorized to assist in disaster relief efforts in order for that entity to locate a family member or other persons that may be involved in some aspect of caring for you.

Business Associates. Certain aspects and components of Tina Joyce D.O., LLC services are performed through contracts with outside persons or organizations, such as auditing, accreditation, lab services, etc. At times, it may be necessary to provide certain of your personal health information to one or more of these outside persons or organizations who assist with Tina Joyce D.O., LLC health care operations. In all cases, these business associates are required to appropriately safeguard the privacy of your information.

Appointments and Services. Tina Joyce D.O., LLC may contact you to provide appointment reminders or test results. You have the right to request, and Tina Joyce D.O., LLC will accommodate reasonable requests by you to receive communications regarding your personal health information from us by alternative means or at alternative locations. For instance, you may wish appointment reminders not to be left on voice mail or sent to a particular address. You may request such confidential communication in writing.

Health Products and Services. Tina Joyce D.O., LLC may from time to time use your personal health information to communicate with you about health products and services necessary for your treatment, to advise you of new products and services offered by Tina Joyce D.O., LLC and to provide general health and wellness information.

Research. In limited circumstances, TINA JOYCE D.O., LLC may use and disclose your personal health information for research purposes. For example, a research organization may wish to compare outcomes of all patients that received a particular drug and will need to review a series of medical records. In all cases where your specific authorization has not been obtained, your privacy will be protected by strict confidentiality requirements applied by the Institutional Review Committee which oversees the research or by representations of the researchers that limit their use and disclosure of patient information.

Confidentiality of Alcohol and Drug Abuse Patient Records. The confidentiality of alcohol and drug abuse patient records maintained by Tina Joyce D.O., LLC is protected by federal law and regulations. Generally, Tina Joyce D.O., LLC may not disclose any information identifying you as an alcohol or drug abuser unless: a. you consent in writing, b. the disclosure is allowed by a court order or c. the disclosure is made to medical personnel in a medical emergency or to qualified personnel for research, audit or program evaluation.

Other Uses and Disclosures. Federal law and regulations do not protect any information about a crime committed by you either at Tina Joyce D.O., LLC, or against any person who works for Tina Joyce D.O., LLC, or about any threat to commit such a crime. Federal laws and regulations do not protect any information about suspected child or elder abuse or neglect from being reported under

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State law to appropriate State or local authorities. Tina Joyce D.O., LLC is permitted or required by law to make certain other uses and disclosure of your personal health information without your consent or authorization:

For any purpose required by law.

For public health activities, such as required reporting of disease, injury, and birth and death, and for required public health investigations.

For suspected child abuse or neglect; or if there is suspicion that you may be a victim of abuse, neglect or domestic violence.

To the Food and Drug Administration if necessary to report adverse events, product defects, or to participate in product recalls.

To your employer when Tina Joyce D.O., LLC has provided health care to you at the request of your employer to determine workplace-related illness or injury; in most cases you will receive notice that information is disclosed to your employer.

To a government oversight agency conducting audits, investigations, or civil or criminal proceedings.

If required to do so by a court or administrative ordered subpoena or discovery requests; in some cases you will have notice of such release.

To law enforcement officials as required by law to report wounds and injuries and crimes.

In limited circumstances if a serious threat to health or safety is suspected.

If you are a member of the military as required by armed forces services; or if necessary for national security or intelligence activities.

To workers' compensation agencies if necessary for your workers' compensation benefit determination.

Tina Joyce D.O., LLC may release your personal health information in accordance with any state laws that are more restrictive or limiting than federal privacy regulations. Ohio law requires that we obtain a consent from you before disclosing your personal health information to the Long Term Health Ombudsman regarding your stay in our short-term rehabilitation facility or disclosing the performance or results of an HIV test or diagnosis of AIDS or an AIDS-related condition.

RIGHTS THAT YOU HAVE

Access to Your Personal Health Information. You have the right to a copy and/or inspect much of the personal health information that Tina Joyce D.O., LLC retains on your behalf. All requests for access must be made in writing and signed by you or your representative.

Amendments to Your Personal Health Information. You have the right to request in writing that personal health information that Tina Joyce D.O., LLC maintains be amended or corrected. Tina Joyce D.O., LLC is not obligated to make all requested amendments but will give each request careful consideration. All amendment requests, in order to be considered by Tina Joyce D.O., LLC or must be in writing, signed by you or your representative, and must state the reasons for the amendment/correction request. If a requested amendment or correction is made by Tina Joyce D.O., LLC and/or notification may be made to others who work with us and have copies of the uncorrected record if such notification is necessary.

Accounting for Disclosures of Your Personal Health Information. You have the right to receive an accounting of certain disclosures made by Tina Joyce D.O., LLC of your personal health information after April 14, 2003. Requests must be made in writing and signed by you or your representative. The first accounting in any 12 month period is free; you will be charged a fee of \$25 for each subsequent accounting in the 12 month period.

Restrictions on Use and Disclosure of Your Personal Health Information. You have the right to request restrictions on certain of Tina Joyce D.O., LLC uses and disclosures of your personal health information for treatment, payment, or health care operations. Tina Joyce D.O., LLC is not required to agree to your restriction request but will attempt to accommodate reasonable requests when appropriate. Tina Joyce D.O., LLC retains the right to terminate an agreed-to restriction if it is believed such termination is appropriate. In case of the termination by Tina Joyce D.O., LLC you will be notified of such termination. You also have the right to eliminate, in writing or orally, any agreed-to restriction.

Complaints. If you believe your privacy rights have been violated, you can file a complaint with any team member, supervisor or Dr. Tina Joyce by mail or by telephone. You may also file a complaint with the Secretary of the U.S. Department of Health and Human Services in Washington D.C. in writing within 180 days of a violation of your rights. There will be no retaliation for filing a complaint.

Acknowledgment of Receipt of Notice. You will be asked to sign an acknowledgement form that you received the Notice of Privacy Practices.

FOR FURTHER INFORMATION

If you have questions or need further assistance regarding this Notice, you may contact Tina Joyce D.O., LLC at 440-375-5520. As a patient, you retain the right to obtain a paper copy of this Notice of Privacy Practices, even if you have requested such copy by e-mail or other electronic means.

EFFECTIVE DATE

This Notice of Privacy Practices is effective May 22, 2007.